## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

030686

| CLAIMS AS FILED - PART I (Column 1)                                                                                                                                                                                                                 |                                                |                                           |                |                                            | (Column 2)   |                  | SMALL<br>TYPE | SMALL ENTITY TYPE      |          | OTHER THAN SMALL ENTITY |                        |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------|-------------------------------------------|----------------|--------------------------------------------|--------------|------------------|---------------|------------------------|----------|-------------------------|------------------------|
| T                                                                                                                                                                                                                                                   | OTAL CLAIMS                                    | ;                                         | 20             |                                            |              | ·                | RATE          | FEE                    | ٦        | RATE                    | FEE                    |
| FOR                                                                                                                                                                                                                                                 |                                                |                                           | NUMBER         |                                            | NUMBER EXTRA |                  | BASIC F       |                        | ) OR     | BASIC FEE               | <del> </del>           |
| TC                                                                                                                                                                                                                                                  | OTAL CHARGE                                    | ABLE CLAIMS                               | 20 mir         | inus 20= *                                 | * 0          |                  | XS 9=         | :                      | OR       | 7,010                   | 0                      |
| INI                                                                                                                                                                                                                                                 | DEPENDENT CI                                   | LAIMS                                     | 3 m            | ninus 3 = *                                |              | 0                | X43=          | +                      |          | Voc                     | 0.                     |
| MULTIPLE DEPENDENT CLAIM PRESENT                                                                                                                                                                                                                    |                                                |                                           |                |                                            |              |                  | <u> </u>      |                        | OR       |                         |                        |
| * 11                                                                                                                                                                                                                                                | the difference                                 | e in column 1 is                          | ero, enter "0" | " in c                                     | column 2     | +145=            | <u> </u>      | OR                     |          | 0                       |                        |
|                                                                                                                                                                                                                                                     |                                                | •                                         |                | ENDED - PART II                            |              |                  | TOTAL         | ٠ ــــــ               | OR       | TOTAL                   | 170                    |
|                                                                                                                                                                                                                                                     |                                                | (Column 1)                                |                | (Column 2                                  | 2)           | (Column 3)       | SMALI         | L ENTITY               | OR       | OTHER<br>SMALL E        |                        |
| AMENDMENT A                                                                                                                                                                                                                                         |                                                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGHEST<br>NUMBER<br>PREVIOUSI<br>PAID FOR | R<br>SLY     | PRESENT<br>EXTRA | RATE          | ADDI-<br>TIONAL<br>FEE |          | RATE                    | ADDI-<br>TIONAL<br>FEE |
| NDN                                                                                                                                                                                                                                                 | Total                                          | *                                         | Minus          | **                                         |              | =                | XS 9=         |                        | OR       | X\$18=                  |                        |
| AME                                                                                                                                                                                                                                                 | Independent                                    | *                                         | Minus          | ***                                        |              | =                | X43=          |                        | OR       | X86=                    |                        |
|                                                                                                                                                                                                                                                     | FIRST PHESE                                    | ENTATION OF MU                            | JLTIPLE DE     | PENDENT CL                                 | AIM          |                  | +145=         | 1                      | OR       | +290=                   |                        |
|                                                                                                                                                                                                                                                     |                                                |                                           |                |                                            |              |                  | TOTA          |                        | ٦        | TOTAL                   |                        |
|                                                                                                                                                                                                                                                     |                                                | (Column 1)                                |                | (Column 2                                  | 2)           | (Column 3)       | ADDIT. FEI    | Ē <b></b>              | <b>]</b> | ADDIT. FEE              |                        |
| AMENDMENT B                                                                                                                                                                                                                                         |                                                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGHEST<br>NUMBER<br>PREVIOUSL<br>PAID FOR | R<br>SLY     | PRESENT<br>EXTRA | RATE          | ADDI-<br>TIONAL<br>FEE |          | RATE                    | ADDI-<br>TIONAL<br>FEE |
| NON                                                                                                                                                                                                                                                 | Total                                          | *                                         | Minus          | **                                         |              | =                | X\$ 9=        | T.                     | OR       | X\$18=                  | <del></del> -          |
| AME                                                                                                                                                                                                                                                 |                                                | *                                         | Minus          | ***                                        | لــَــ       | =                | X43=          |                        | OR       | X86=                    |                        |
| <u> </u>                                                                                                                                                                                                                                            | FIRST PHESE                                    | NTATION OF MU                             | LTIPLE DEP     | ENDENT CLA                                 | AIM          |                  | +145=         | †                      | OR       | +290=                   |                        |
|                                                                                                                                                                                                                                                     |                                                |                                           |                |                                            |              | ,                | TOTAL         | -                      |          | TOTAL                   |                        |
|                                                                                                                                                                                                                                                     |                                                | (Column 1)                                |                | (Column 2                                  | 21           | (Column 3)       | ADDIT. FEE    | : <b></b>              | ,        | ADDIT. FEE              |                        |
| ENT C                                                                                                                                                                                                                                               |                                                | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                | HIGHEST<br>NUMBER<br>PREVIOUSL<br>PAID FOR | LY           | PRESENT<br>EXTRA | RATE          | ADDI-<br>TIONAL<br>FEE |          | RATE                    | ADDI-<br>TIONAL<br>FEE |
| AMENDMENT                                                                                                                                                                                                                                           | Total                                          | *                                         | Minus ··       | **                                         |              | =                | X\$ 9=        |                        | OR       | X\$18=                  |                        |
| AME                                                                                                                                                                                                                                                 |                                                | L                                         | Minus          | ***                                        |              | =                | X43=          |                        | OR       | X86=                    |                        |
| <u> </u>                                                                                                                                                                                                                                            | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |                                           |                |                                            |              |                  |               |                        | 1        |                         |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.                                                                                                                                                               |                                                |                                           |                |                                            |              |                  |               |                        | OR       | +290=<br>TOTAL          |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                                                |                                           |                |                                            |              |                  |               |                        |          |                         |                        |